



9800/3723

PTO/SB/81 (01-09)

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OR
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AND
CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	09778525
Filing Date	02/06/2001
First Named Inventor	Douglas Ronald McCarter
Title	Vice President
Art Unit	
Examiner Name	
Attorney Docket Number	McCarter-1

I hereby revoke all previous powers of attorney given in the above-identified application.

A Power of Attorney is submitted herewith.

OR

I hereby appoint Practitioner(s) associated with the following Customer Number as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith:

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I hereby appoint Practitioner(s) named below as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith:

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Please recognize or change the correspondence address for the above-identified application to:

The address associated with the above-mentioned Customer Number.

OR

The address associated with Customer Number:

Practitioner(s) Name

Firm or Individual Name: McCarter Machine Inc

Address: 1312 Underwood Road

City: La Porte State: TX Zip: 77571

Country: USA

Telephone: 281-476-4716 Email: dmccarter@mccarteret.com

I am the:

Applicant/Inventor:

OR

Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) (Form PTO/SB/96) submitted herewith or filed on _____.

SIGNATURE of Applicant or Assignee of Record

Signature	Douglas R McCarter	Date	10/05/2011
Name	Douglas R McCarter	Telephone	281-476-4716
Title and Company	Vice President, McCarter Machine Inc		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

*Total of _____ forms are submitted.

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